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"Teach Back" A Tool for Improving Provider-Patient Communication

Health care practitioners have an ethical responsibility to promote shared decision making. They have a professional obligation to work with patients (or their surrogates) to negotiate treatment plans that respect the patient's values, preferences, and goals for care. To meet that obligation, practitioners must ensure that they communicate effectively with patients and surrogates.

The Communication Challenge

Communicating effectively is an important aspect of showing respect to patients. And it has practical benefits: Effective communication promotes greater satisfaction and helps ensure better adherence to treatment plans, with better health outcomes for patients.[1] Good communication also reduces the likelihood of lawsuits even when patients don't have good outcomes.[2]

Yet poor communication remains a significant problem in health care. Many practitioners are not well trained in basic communication skills, such as asking open-ended questions to elicit information ("What brings you to the clinic this morning?"), reflecting patients' comments back to them ("I hear you saying your new medication makes you sleepy"), or using other active listening techniques.[3] And formal training rarely focuses on the communication tasks that must be completed in patient-provider encounters.

Moreover, practitioners tend to *under*estimate patients' needs for information, and *over*estimate their own effectiveness in conveying information.[1] For example, one recent study found that 37 percent of patients reported understanding what they were told during a medical visit—but their physicians thought that 80 percent of patients understood the information conveyed.[4,5] Many patients aren't comfortable disclosing that they don't understand what practitioners are saying—asking point

Teaching Back

Ask patients (or their surrogates) to verbally "teach back" information they've received about proposed treatments, services, and procedures.

Who Physicians, nurses, interpreters, and other professionals who communicate with patients about their health care decisions.

What Have patients explain, in everyday words,
- diagnosis/health problem for which they need care;
- name/type/general nature of treatment, service or procedure, including what receiving it will entail;
- risks, benefits, and alternatives to the treatment, service, or procedure.

When Ask for "teach back" early in the care process.

Why Many patients have difficulty understanding basic health information. Asking patients to "teach back" helps you gauge how well they understand.

How Patients should be able to show they understand and not just be asked to pass a "quiz" or to repeat what you said.

***Don't* ask:**

"Do you understand?" or

"Do you have any questions?"

***Do* ask:**

"I want to be sure I was clear. Can you tell me, in your own words, how you should take this medication?" or

"To be sure I've explained your treatment clearly, please tell me, in your own words, how you'd describe it to your wife/husband." or

"It's important that we're on the same page about your care. Can you tell me, in your own words, what our plan is?"

Adapted from National Quality Forum *Implementing a National Voluntary Consensus Standard for Informed Consent,* 2005.

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blank, "Do you understand?" puts them on the spot. And a nod in response doesn't guarantee they've actually heard and understood what's been said.

To make it easier for patients to understand health information (and thus to give *informed* consent), practitioners must establish conditions for effective communication.[6] Among other things, they should provide a safe environment, in which patients feel comfortable asking questions. Practitioners should use plain language—e.g., "sore" or "wound" instead of "lesion"; "bad" instead of "adverse" reaction.[7] And they should use the technique of "teach back," asking the patient to recount what he or she has been told, to help gauge the level of understanding.

Using "Teach Back" to Improve Communication

The National Quality Forum (NQF) identified teaching back as one of 50 essential "safe practices" to improve health care.[5] Patients who are asked to teach back may have better recall and understanding of procedures,[8] and may follow treatment plans more carefully.[1] Teaching back can also improve efficiency in clinical practice. For example, the NQF found that initiating teach back in a large academic medical center led to fewer surgeries delayed or cancelled because patients hadn't understood instructions.[5]

Practitioners can use teach back to identify patient-specific barriers to communication, for example, low health literacy, which includes more than just difficulty reading. Cognitive impairments, such as early stage dementia, and, especially, limited proficiency in English (possibly indicating the need for a medical interpreter), also contribute.

Nearly half of all American adults have "difficulty understanding and acting on health information,"[9] and approximately one-fifth of VA patients have limited health literacy skills for one reason or another.[4] There can be other barriers to effective communication as well, for example, when patients have hearing problems.

Asking patients to recount instructions for taking medication or to describe a proposed procedure can alert practitioners to individuals' particular needs and challenges and help clinicians tailor communication more effectively. Learning to ask for teach back in ways that don't intimidate patients is key.

Practitioners can also use teach back as a tool for assessing their own communication skills.

Using teach back to communicate more effectively does take time. But facilities that were early adopters of NQF's Safe Practice 10 found that teach back typically took less than a minute to complete once practitioners became accustomed to using the technique. Improving communication helps practitioners get the most out of each interaction they have with their patients—to the benefit of patient and provider alike.[10]

References & Resources

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